



07-21-05

AF/3627
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PTO/SB/21 (04-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/865,799
		Filing Date	May 25, 2001
		First Named Inventor	Lincoln Rodon
		Art Unit	3627
		Examiner Name	Gerald J. O'Connor
Total Number of Pages in This Submission	5	Attorney Docket Number	31175934.066005

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Petition for 2 Mo. Ext. of time; return postcard; cert. of mailing; check in the amount of \$950.00
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	BAKER & MCKENZIE LLP Margaret A. Boulware- Reg. No. 28,708
Signature	<i>CM Pilech w/ permission #46,991</i>
Date	<i>July 20, 2005</i>

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as Express Mail No. EV658015929US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: <u>7-20-05</u>	Signature: <i>Jesse Taylor</i> (Jesse Taylor)



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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/865,799
TOTAL AMOUNT OF PAYMENT		Filing Date	May 25, 2001
(\$) 950.00		First Named Inventor	Lincoln Rodon
		Examiner Name	Gerald J. O'Connor
		Art Unit	3627
		Attorney Docket No.	31175934.066005

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account
Deposit Account Number: **50-3420** Deposit Account Name: **Baker & McKenzie LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
_____ - 20 = _____	x _____	=	0.00	_____	_____	_____
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
_____ - 3 = _____	x _____	=	0.00			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____	=	_____

4. OTHER FEE(S)

Petition for Extension of Time and Notice of Appeal	Fees Paid (\$)
	950.00

SUBMITTED BY			
Signature	<i>C. M. P. #46991</i>	Registration No. (Attorney/Agent)	28,708
Name (Print/Type)	Margaret A. Boulware <i>W/ permission</i>	Telephone (713) 427-5003	
		Date	July 20, 2005



Application No. (if known): 09/865,799


Attorney Docket No.: 31175934.066005

Certificate of Express Mailing Under 37 CFR 1.10

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Signature

Jesse Taylor

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Note: Transmittal Letter (1page)
Fee Transmittal (1 page)
Petition for Extension of Time (1 page)
Notice of Appeal (1 page)
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